

<i>SERFF Tracking Number:</i>	<i>GEFA-127104097</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Genworth Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48365</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		

Filing at a Glance

Company: Genworth Life Insurance Company		
Product Name: Long Term Care Insurance	SERFF Tr Num: GEFA-127104097	State: Arkansas
TOI: LTC03I Individual Long Term Care	SERFF Status: Closed-Filed-Closed	State Tr Num: 48365
Sub-TOI: LTC03I.001 Qualified	Co Tr Num:	State Status: Filed-Closed
Filing Type: Advertisement		Reviewer(s): Harris Shearer, Stephanie Fowler
	Author: Andy Zimmerman	Disposition Date: 04/06/2011
	Date Submitted: 03/30/2011	Disposition Status: Filed-Closed
Implementation Date Requested: On Approval		Implementation Date:
State Filing Description:		

General Information

Project Name: PC Flex Rate Illustration-Employer-Correction	Status of Filing in Domicile: Pending
Project Number: 116278AA	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: Resubmission	Previous Filing Number: GEFA-127087835
Individual Market Type:	Overall Rate Impact:
Filing Status Changed: 04/06/2011	
State Status Changed: 04/06/2011	Deemer Date:
Created By: Andy Zimmerman	Submitted By: Andy Zimmerman
Corresponding Filing Tracking Number:	
Filing Description:	
The Privileged Choice Flex Rate Illustration-All Age Summary-Employer, 116278AA 03/29/11, will be distributed by licensed agents from our career and broker channels at point of sale, and presented in conjunction with the Outline of Coverage to provide a quotation of rates to employers for Genworth Life Insurance Company's Long Term Care Insurance Policy 7052 filed and approved on November 22, 2010 by your Department under SERFF Tracking Number GEFA-126825424.	

The Privileged Choice Flex Rate Illustration-All Age Summary-Employer, 116278AA 03/29/11, will be presented to Employers who are interested in providing individual long term care insurance to their employees as an employee benefit (voluntary or contributory). This illustration is not intended to be distributed to employees.

<i>SERFF Tracking Number:</i>	<i>GEFA-127104097</i>	<i>State:</i>	<i>Arkansas</i>
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<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		

An Explanation of Variables is attached to the Supporting Documentation tab.

The Privileged Choice Flex Rate Illustration-All Age Summary-Employer, 116278AA 03/15/11, was Filed-Closed by your Department on 03/21/2011 under SERFF Tracking Number GEFA-127087835. We detected an inadvertent omission on the illustration, therefore we are resubmitting to your Department. We corrected the illustration to include the messaging and data on the top of page 4.

Company and Contact

Filing Contact Information

Andy Zimmerman, Advertising Review Analyst	andy.zimmerman@genworth.com
6620 W. Broad Street	804-484-3949 [Phone]
Long Term Care	804-281-6334 [FAX]
Bldg. #4, 2nd Floor	
Richmond, VA 23230-1700	

Filing Company Information

Genworth Life Insurance Company	CoCode: 70025	State of Domicile: Delaware
6610 W Broad Street	Group Code: 350	Company Type: LifeHealth & Annuity
Richmond, VA 23230	Group Name:	State ID Number:
(804) 281-6600 ext. [Phone]	FEIN Number: 91-6027719	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Arkansas filing fee=\$50 per advertisement. We are submitting one advertisement=\$50.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Genworth Life Insurance Company	\$50.00	03/30/2011	46088629

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
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<i>SERFF Tracking Number:</i>	<i>GEFA-127104097</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		
	<i>\$0.00</i>		

SERFF Tracking Number:	GEFA-127104097	State:	Arkansas
Filing Company:	Genworth Life Insurance Company	State Tracking Number:	48365
Company Tracking Number:			
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Long Term Care Insurance		
Project Name/Number:	PC Flex Rate Illustration-Employer-Correction/116278AA		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	04/06/2011	04/06/2011

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<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		

Disposition

Disposition Date: 04/06/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>GEFA-127104097</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter	Filed	Yes
Supporting Document	Explanation of Variables-11678AA 03/29/11	Filed	Yes
Form	Privileged Choice Flex Rate Illustration-All Age Summary-Employer	Filed	Yes

SERFF Tracking Number: GEFA-127104097 State: Arkansas

Filing Company: Genworth Life Insurance Company State Tracking Number: 48365

Company Tracking Number:

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Long Term Care Insurance

Project Name/Number: PC Flex Rate Illustration-Employer-Correction/116278AA

Form Schedule

Lead Form Number: 116278AA 03/29/11

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 04/06/2011	116278AA 03/29/11	Advertising	Privileged Choice Flex Rate Illustration- All Age Summary- Employer	Revised	Replaced Form #: 116278AA 03/15/11 Previous Filing #: GEFA-127087835		116278AA 032911 PC FLEX AA CORRECTIO N.pdf

A SUGGESTED LONG TERM CARE INSURANCE PLAN OFFERED BY
GENWORTH LIFE INSURANCE COMPANY
Multi-Life Long Term Care Insurance

3/2/1

Policy Form Series 7052[xx]
To be issued in [Resident state]

Prepared For : [ACME Corp.]

[Presented By] : [A. Good Agent]
[Organization] : [Agood Ins. Co.]
[Address] : [123 Main St.
[Anycity, VA 12345]
[Telephone] : [(555) 123-4567]
[Fax] :
[License #] : [CA12345]

Prepared : [February 16 2011]

A SUGGESTED LONG TERM CARE INSURANCE PLAN OFFERED BY
GENWORTH LIFE INSURANCE COMPANY

Plan Options Plan Choice	Plan 1 [Privileged Choice [®] Flex] Individual Plan	[Plan 2] [Privileged Choice [®] Flex] Individual Plan	[Plan 3] [Privileged Choice [®] Flex] Individual Plan
[Daily/Monthly/Nursing Facility/Facility] Maximum: [Benefit Period / Multiplier/Total Coverage:]	[\$x.xxx][Daily/Monthly] [XX[Days/Months]]	[\$x.xxx][Daily/Monthly] [XX[Days/Months]]	[\$x.xxx][Daily/Monthly] [XX[Days/Months]]
[Coverage Maximum/Pool of Money/Personal Benefit Account:]	[\$XX,XXX]	[\$XX,XXX]	[\$XX,XXX]
[Covered Percentage:]	[80%/100%]	[80%/100%]	[80%/100%]
[Elimination Period:]	[XX][Calendar/Service]Days]	[XX][Calendar/Service]Days]	[XX][Calendar/Service]Days]
[Benefit Increase Option:]	[X% Compound] [Reduced by Claims/ Not Reduced by Claims]	[X% Compound] [Reduced by Claims/ Not Reduced by Claims]	[X% Compound] [Reduced by Claims/ Not Reduced by Claims]
[Restoration Benefit:]	[Included/None]	[Included/None]	[Included/None]
[Survivorship Benefit:]	[10-Year/7-Year Enhanced/10-Year Enhanced/None]	[10-Year/7-Year Enhanced/10-Year Enhanced/None]	[10-Year/7-Year Enhanced/10-Year Enhanced/None]
Option:			
[NonForfeiture Benefit Option:]	[Included/None]	[Included/None]	[Included/None]
[Refund of Premium Option:]	[Graded/10-Year/None]	[Graded/10-Year/None]	[Graded/10-Year/None]
[Premium Payment Period:]	[Lifetime/10-Pay/Pay-to-65]	[Lifetime/10-Pay/Pay-to-65]	[Lifetime/10-Pay/Pay-to-65]
[Shared Coverage Option:]	[Included with Joint Waiver of Premium/Included without Joint Waiver of Premium/None]	[Included with Joint Waiver of Premium/Included without Joint Waiver of Premium/None]	[Included with Joint Waiver of Premium/Included without Joint Waiver of Premium/None]
[Family Care Benefit:]	[Included/None]	[Included/None]	[Included/None]
[Home Care Type:]	[Formal and Informal]	[Formal and Informal]	[Formal and Informal]
[Home Care Percentage:]	[50%/60%/75%/100%]	[50%/60%/75%/100%]	[50%/60%/75%/100%]
[Assisted Living Facility Percentage:]	[50%/60%/75%/100%]	[50%/60%/75%/100%]	[50%/60%/75%/100%]
[International [Coverage/Nursing Facility] Benefit:]	[Included]	[Included]	[Included]
[Transition Benefit:]	[Included/None]	[Included/None]	[Included/None]
[1 st Day Home Care Elimination Period:]	[Included/None]	[Included/None]	[Included/None]
[Waiver of Premium:]	[Nursing Facility Only/Full Premium Waiver/None]	[Nursing Facility Only/Full Premium Waiver/None]	[Nursing Facility Only/Full Premium Waiver/None]

Modal Payment:

[Annual]

[Annual]

[Annual]

Modal Premium Disclosure: Although premiums are calculated on an annual basis, premiums may be shown on a monthly, quarterly or semi-annual basis. Annual premiums may be paid in advance at the beginning of each coverage year. However, your premiums may be paid on a more frequent basis throughout your coverage year. If you pay your premiums more frequently than annually (e.g. monthly, quarterly or semi-annually), there will be additional charges that apply. The more frequent the premium payment mode, the more charges you will incur. For example, the total annual premium paid on a monthly basis will be more than the total premium paid on a quarterly basis. As a result, the total annual premiums paid will be higher for Monthly, Quarterly or Semi-Annual payment modes than if you paid premiums on an Annual mode. For more information, please refer to the Modal Premium Disclosure in your Policy or Certificate.

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Participants Summary

[Age	Plan 1	[Plan 2]	[Plan 3]
18-24	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
25-29	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
30-34	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
35-39	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
40-44	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
45	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
46	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
47	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
48	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
49	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
50	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
51	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
52	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
53	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
54	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
55	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
56	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
57	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
58	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
59	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
60	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
61	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
62	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
63	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
64	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
65	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
66	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
67	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
68	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
69	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
70	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
71	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
72	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
73	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
74	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
75	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
76	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
77	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
78	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]
79	\$[XXX.XX]	\$[XXX.XX]	\$[XXX.XX]

]

[[Assumed combined, marginal federal, state and local Corporate Tax Rate (C-corp): XX%

	[Name	Spouse/ Partner	Age	[Preferred Discount]	[Couples Discount]	Plan 1	[Plan 2	[Plan 3]
1	Valued Customer		[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
		Spouse	[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
2	Valued Customer		[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
		Spouse	[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
3	Valued Customer		[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
		Spouse	[XX]	[Yes/No]	[Yes/No]	[\$XXX.XX]	[\$XXX.XX]	[\$XXX.XX]
Totals						[\$X,XXX.XX]	[\$X,XXX.XX]	[\$X,XXX.XX]
[Total After Tax Cost]						[\$X,XXX.XX]	[\$X,XXX.XX]	[\$X,XXX.XX]

]

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This is a solicitation of insurance and an insurance agent/producer will contact you. This is not a contract of insurance. Coverage is subject to the underwriting requirements of Genworth Life Insurance Company.

The information herein has been prepared for the Company/Business outlined on the cover page of this illustration. As such, the information is based on the products and applicable features, benefits and rates approved in the State in which the Company/Business maintains its principal place of business, or as otherwise designated by the Company/Business. Products and applicable features, benefits, rates or possible discounts may vary when a Participant resides in a State other than the State quoted for the Company/Business. As a result of these factors, the actual premium for each applicant for any policy may be higher or lower than the premium quoted.

[The above premium includes a [preferred health][,] [couples] [and] Multi-Life discount.]

This Long Term Care Insurance quote is intended for illustrative purposes only and may be subject to change for any reason, including changes in premiums quoted. Dollar amounts may be rounded for purposes of Illustration.

In the event coverage is issued, any difference between the premiums quoted in this illustration and the premiums shown in your Policy Schedule, the premiums shown in your Policy Schedule will govern.

Premiums shown are subject to the terms and conditions of the Policy and may change in the future. While Genworth Life Insurance Company reserves the right to raise future premiums by class and state, your premiums will never increase individually due to changes in your health status or your age.

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<i>Company Tracking Number:</i>			
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<i>Product Name:</i>	<i>Long Term Care Insurance</i>		
<i>Project Name/Number:</i>	<i>PC Flex Rate Illustration-Employer-Correction/116278AA</i>		

Supporting Document Schedules

		Item Status:	Status
			Date:
Satisfied - Item:	Cover Letter	Filed	04/06/2011
Comments:			
Attachment:			
	AR Filing Letter PC FLEX Rate Illustration CORRECT 116278AA 032911.pdf		

		Item Status:	Status
			Date:
Satisfied - Item:	Explanation of Variables-11678AA 03/29/11	Filed	04/06/2011
Comments:			
Attachment:			
	EOV 11627AA 032911 CORRECTION AA.pdf		



Long Term Care Insurance

6620 West Broad Street Building 4
Richmond, VA 23230

March 30, 2011

Arkansas Department of Insurance
1200 West Third Street
Little Rock, Arkansas 72204
ATTN: Mr. John Shields

Re: **ADVERTISING FILING ACCIDENT AND HEALTH INSURANCE**
GENWORTH LIFE INSURANCE COMPANY NAIC# 70025
Invitation to Contract (Point of Sale)
Privileged Choice Flex Rate Illustration-All Age Summary-Employer: 116278AA 03/29/11
CORRECTION TO SERFF Tracking Number: GEFA-127087835

Dear Mr. Shields:

On behalf of Genworth Life Insurance Company, I submit for your review and approval a copy of the above referenced advertising material intended for use in the state of Arkansas. The filing fee of \$50 is being transmitted via EFT on the SERFF filing system.

The Privileged Choice Flex Rate Illustration-All Age Summary-Employer, 116278AA 03/29/11, will be distributed by licensed agents from our career and broker channels at point of sale, and presented in conjunction with the Outline of Coverage to provide a quotation of rates to employers for Genworth Life Insurance Company's Long Term Care Insurance Policy 7052 filed and approved on November 22, 2010 by your Department under SERFF Tracking Number GEFA-126825424.

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An Explanation of Variables is attached to the Supporting Documentation tab.

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If you should have any questions, please call me at our toll free phone number, 1-800-284-5568, extension 8133949, fax me at 804-662-2596 or e-mail me at Andy.Zimmerman@genworth.com.

Sincerely,

Andrew A. Zimmerman

Andrew A. Zimmerman
Genworth Life Insurance Company
Sr. Advertising Compliance Analyst
Compliance/Advertising Review
Andy.Zimmerman@genworth.com

**GENWORTH LIFE INSURANCE COMPANY
EXPLANATION OF VARIABILITY
INDIVIDUAL LONG TERM CARE INSURANCE ILLUSTRATION**

This Explanation of Variability applies to the illustration components listed below. Variable material is bracketed. The Illustrations are generic for use with the sale of the new individual policy form series 7052. It includes three types of variability.

Type 1: Variables are either administrative (phone numbers, addresses, etc.) or for the individualized information that is populated with the Individual Policyholder's and eligible person's specific data.

Type 2: Variables that will or will not appear, dependent on whether or not the Individual Policy includes a specific option.

Type 3: Variables that have substitute text.

Advertising Forms for the purpose of this Explanation of Variability include:

Form Number	Title	Type of Solicitation
116278AA	Plan Illustration – Multi-Life	Invitation to Contract

We have listed the variables for each advertising component in the order in which they appear above.

**GENWORTH LIFE INSURANCE COMPANY
EXPLANATION OF VARIABILITY
INDIVIDUAL LONG TERM CARE INSURANCE ILLUSTRATION**

Explanation of Variables-Rate Illustrations

The following Riders or Options available with Privileged Choice Flex Individual policy. The Rate Illustration material is data that has been printed as a sample from our rate illustration disk and serves as a suggestion. After the insurance agent inputs data into the software program, the information prints in the manner shown in the submitted material and is based on the policy form and options requested (or input), age of client, discounts, individual or shared plan, etc.

116278AA 03/29/11

PLAN OPTION sections will display all or some of the following depending on the plan design for the specific Individual policy and the marketing campaign any one of the labels and/or variables listed in brackets will appear.

- **Pool of Money**
 - o Label option can change based on plan design to either Coverage Maximum or Personal Benefit Account.
- **Daily or Monthly Maximum** based on selection
 - o Label option can change based on plan design to Nursing Facility or Facility Maximum
 - o If Daily benefits are chosen, dollar amounts will range from \$50 - \$400 in \$5 increments
 - o If Monthly benefits are chosen, dollar amounts will range from \$1,500 - \$12,000 in \$100 increments
- **Benefit Period**
 - o Label option can change based on plan design to either Benefit Multiplier or Total Coverage.
 - o Based on selection can be anyone of the following:
 - If Days: 730, 1095, 1460, 1825, 2190, 2920, 3650
 - If Months: 24, 36, 48, 60, 72, 96, 120 or Unlimited
- **Restoration of Benefit** - Based on selection will either be Included or None
- **Survivorship Benefit** - Based on selection will either be:
 - 10-Year, 7-Year Enhanced, 10-Year Enhanced or None
- **Nonforfeiture Benefit** - Based on selection will either be Included or None
- **Refund of Premium Benefit** – Based on selection will either be:
 - Graded, 10-Year, or None
- **Premium Payment Period** – Based on selection will either be:
 - Lifetime, 10-Pay, or Pay-to-65
- **Home Care Type** – Will always be Formal and Informal
- **Home Care Percentage** - Based on selection will either be:
 - 50%, 60%, 75%, or 100%
- **Bed Reservation Benefit** – Will always be 60 Days
- **International Coverage** – Will always be Included
 - o Based on marketing campaign will be either International Coverage Benefit or International Nursing Facility Benefit
- **Respite Care Benefit** – Based on marketing campaign may or may not be offered. If selected will be 30 Days

GENWORTH LIFE INSURANCE COMPANY
EXPLANATION OF VARIABILITY
INDIVIDUAL LONG TERM CARE INSURANCE ILLUSTRATION

- **Assisted Living Facility Benefit** – Based on marketing campaign may or may not be offered. If selected will be Includes Room Charges
- **Assisted Living Facility Percentage** - Based on selection will either be:
 - 50%, 60%, 75%, or 100%
- **Waiver of Premium** - Based on selection will either be:
 - Nursing Facility Only, Full premium Waiver, or None
- **Family Care Benefit** - Based on marketing campaign will either be Included or None.
- **Shared Coverage Option** -
 - Based on plan design and selection will be With Joint Waiver of Premium, Without Joint Waiver of premium or None
 - Upon selection will also display 'Assumes Identical Coverage'
- **Transition Benefit** – Based on Selection will either be Included or None
- **Covered Percentage** – Based on marketing campaign will either be 80% or 100%
- **1st-Day Home Care Elimination Period** - Based on selection will either be Included or None
- **Premium Payment Mode** – Based on selection will be:
 - Annual, Semi-Annual, Quarterly, Monthly
- **Age** – Displays Individuals age
- **Modal Premium** – Displays modal premium dollar amount
- **Preferred Health Discount (xx%)** - Displays percentage and dollar amount if individual qualifies
- **Couples Discount (xx%)** – Displays percentage and dollar amount if individual qualifies.
- **Total Modal Premium** - premium and discounts added
- **Multi Life Discount (xx%)** – Displays percentage and dollar amount if qualified
- **Net Modal Premium** – Displays Modal dollar amount

116278AA-Plan Illustration/Multi-Life (Invitation to Contract)

Type 1 Variables:

1. Client specific information, such as organization, policyholder names, eligible classes, agents, producers, and plan design elements, discounts, and rate guarantees, etc., are based on the specific Individual policy.
2. "Multi-Life" illustration will generate when a multi client illustration is created

Type 2 & 3 Variables:

1. Personalized information may not appear on the cover.
2. Spouse/Partner information will be included only if available under the terms of the specific individual policy.
3. Cover will display the policy form series along with the state abbreviation if applicable (i.e. 7052[xx]).
4. PARTICPANTS SUMMARY will print one of the following sections based on input in the quote tool:
 - Section with Plans 1, 2 and 3 will display when quoting for an employer (all ages quote) with multiple plan configurations
 - Section with Name and Spouse/Partner will display if a census is quoted.

**GENWORTH LIFE INSURANCE COMPANY
EXPLANATION OF VARIABILITY
INDIVIDUAL LONG TERM CARE INSURANCE ILLUSTRATION**

- If a C-Corp is quoted the following bracketed information will print:
 - 'Assumed combined, marginal federal, state and local Corporate Tax Rate C-corp: xx%'
 - Total After Tax Cost
 - Census Customer names and Spouse/Partner names will print when input.
 - The 'Preferred' or 'Couples' discount will only display if quoted.
5. Within the disclosure section, the bracketed sentence will only appear if Preferred Health, Couples or Multi-Life discount is quoted.